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Matters arising 427

Apparent increase in the prevalence of herpes simplex virus type 1 genital infections among women

We read with interest the recent correspondence by Wilson et al¹ observing an apparent increase in the prevalence of herpes simplex virus (HSV) type 1 infection among women attending a genitourinary medicine (GUM) clinic in Oxford.

The high proportion of type 1 isolates in genital herpes in Sheffield has been a consistent finding since it was first reported in 1982.2 We have also noted a difference between the general practitioner (GP) referred and self referred groups in the viral isolates from first episode genital herpes.3 Among the 128 women who attended with first episode HSV infection between January 1989 and January 1991, 79 patients (61.7%) had already visited their GP with their current complaint prior to the GUM attendance. Of these, 44 patients (55.7%) had type 1 isolates as compared with only 17 (34.7%) of the 49 self referred patients. The ratio of self referred:GP referred patients in terms of the type of HSV isolated was 1:2.6 for type 1 and 1:1 for type 2; the difference between the two groups is significant ($\chi^2 = 5.34$, p < 0.01). The two groups were similar in terms of age and history of recent partner change, although a higher proportion of the self referred group had experienced previous episodes of other sexually transmitted diseases.

We wonder whether the apparent increase in HSV-1 isolates reported from several UK centres may relate in part to a greater willingness of the GPs to refer women to GUM clinics because of their heightened awareness of the need for comprehensive STD screening, counselling and education, and sexual contact management. If so, differences between clinics in both the proof GP referrals and portion HSV-1:HSV-2 ratio amongst women with first episode genital herpes may relate as much to the acceptibility of local GUM services as to real geographical differences in the epidemiology of genital herpes.
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- 1 Wilson P, Crooper L, Sharp I, Fink C. Apparent increase in the prevalence of herpes simplex virus type 1 genital infection among women. Genitourin Med 1994;70: 228
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 2 Barton IG, Kinghorn GR, Najem S, Al-Omar LS, Potter CW. Incidence of herpes simplex virus types 1 and 2 isolated in patients with herpes genitalis in Sheffield. Br J Venereal Dis 1982;58:44-7.
 3 Patel R, Helsen K, Kudesia G, Kingdom GR.
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- 3 Patel R, Helsen K, Kudesia G, Kinghorn GR. Referral patterns for type 1 and type 11 genital herpes simplex infections. Spring meeting of the MSSVD, 1991 (Abstract).

NOTICE

IUVDT World STD/AIDS Congress 1995. 19-23 March 1995, Singapore

For further information contact: Communication Consultants, 336 Smith Street #06-302, New Bridge Centre, Singapore 0105. Telephone (65) 227 9811. Fax (65) 227 0257.

BOOK REVIEWS

Infection in Gynaecology. By J. Richard Smith, Valerie S. Kitchen. Churchill Livingstone. 1994. (Pp 91 £11.95) ISBN 0-434-04756-1.

This book deals with infections of the genital tract with concise, readable descriptions and excellent and appropriate illustrapictures (although the schistosomiasis infection of the fallopian tubes have little relevance to the text). The bias is toward sexually acquired infections and the introduction stresses the importance of taking an appropriate sexual history in a gynaecological setting. A brief outline of investigation and the basis of epidemiological treatment of STDs, is followed by a discussion of the surgical aspects of infection including antibiotic prophylaxis, postoperative sepsis, septic shock, and surgical management. The introduction also includes a guide to management of symptom complexes.

Each infection is dealt with in a succinct manner with details of aetiology, clinical features, diagnosis, treatment, and management of the partner where appropriate. The infections are arranged in alphabetical order, thus making it easy for reference although in a book of this size, subdivision into aetiological agents (that is, bacterial, fungal, viral, protozoal, and infestations) seems to make it unnecessarily complex without improving the ease of reference. The information is basic and would provide a good quick reference or aide memoire. A further appendix giving standard treatment regimes for STDs would have been useful

Overall the book appears to fulfill its pur-

pose, raising the profile of sexually transmitted disease as an important consideration in gynaecological practice in an easily accessible format. It would probably suit both postgraduates and undergraduates looking for basic details about STDs.

SARAH EDWARDS

Lower Genital Tract Precancer—Colposcopy, Pathology and Treatment. By Albert Singer and John M. Monaghan. Oxford: Blackwell Scientific Publications. (Pp 254, £89.50). 1994. ISBN 0-86542-230-3.

"This illustrated textbook is a comprehensive guide to our current understanding of the diagnosis, assessment and management of all genital tract precancers and conditions which may mimic them." The authors' own words and an accurate description of this excellently produced tome. There are ten chapters covering 250 pages. The first chapter is the only one written by outside authors (Ralf Richart and Thomas Wright) and covers the histology of lower ano-genital tract neoplasia. Terminology is well explained and the role of human papillomavirus (HPV) briefly but succinctly covered. One would have to look to an alternative text for a more detailed account on pathogenesis and the molecular biology of HPV infection, which is not a criticism. The next four chapters focus on the diagnosis and management of cervical precancer and are really first class—a must for colposcopists in training and also deserving the attention of even the experienced colposcopist. Intraepithelial neoplasia of the vulva, vagina and anus are reviewed in three separate chapters and although our knowledge of these conditions continues to grow the information provided is up to date. The chapter on VIN rightly emphasises conservative management but also provides a detailed account on surgical excision and laser vaporisation, techniques possibly of less relevance to specialists in genitourinary medicine. Our current lack of knowledge regarding the natural history of AIN is unfortunately not addressed and the need for conservative management fails to gain a mention. Whilst on the negative side, genitourinary medicine clinicians may not entirely agree with all that appears in the final chapter on infective conditions which may be confused with lower genital tract precancer. This aside, and forgiving the misspelling of my name in one chapter, Albert Singer and John Monaghan are to be congratulated. They "commend it to the modern clinician, not only those in training but also those in established practice where regular updating is essential". I wholeheartedly endorse their view.
CHRIS SONNEX

CURRENT PUBLICATIONS

Selected titles from recent reports published worldwide are arranged in the following sections:

Gonorrhoea
Chlamydia
Candidiasis
Bacterial vaginosis
Syphilis and other treponematoses
Hepatitis
Herpes
Human papillomavirus infection
Cervical cytology and colposcopy
Other sexually transmitted diseases
Public health and social aspects
Microbiology and Immunology
Dermatology
Miscellaneous

Gonorrhoea

The use of nonoxynol-9 for protection against cervical gonorrhoea.

SS WEIR, PJ FELDBLUM, L ZEKENG, RE RODDY. Am J Public Health 1994:84:910.

Gonococcal infection of the neovagina in a male-to-female transsexual.

NJ BODSWORTH, R PRICE, SC DAVIES. Sex Transm Dis 1994;21:211.

Decreased susceptibility of Neisseria gonorrhoeae to fluoroquinolones—Ohio and Hawaii, 1992–1994.

Arch Dermatol 1994;130:835.

Efficacy of 250 mg trospectomycin sulfate i.m. vs 250 mg ceftriaxone i.m. for treatment of uncomplicated gonorrhoea.

AM ROMPALO, L COLLETTA, VA CAINE, P LINNEMEIER, T NEUMANN, EW HOOK, RB JONES. Sex Transm Dis 1994;21:213.

Chlamydia

Prevalence of genital chlamydia and mycoplasma infection in couples attending a male infertility clinic.

Z SAMRA, Y SOFFER, M PANSKY. Eur J Epidemiol 1994;10:69.

Prevalence of chlamydia antibody in pregnancy—a matched-pair study.

P OLLIARO, A REGAZZETTI, AL MARCHETTI, P LANZARINI, A SPINILLO, G GORINO. Eur J Epidemiol 1994;10:47.

Detection of *Chlamydia trachomatis* in fallopian tube tissue in women with postinfectious tubal infertility.

DL PATTON, M ASKIENAZYELBHAR, J HENRY-SUCHET, et al. Am J Obstet Gynecol 1994;171:95.

Detection of Chlamydia trachomatis antigen and Toxoplasma gondii (IgM) and Mycoplasma hominis (IgG) antibodies by ELISA in women with bad obstetric his-

A GOGATE, LP DEODAR, PK SHAH, P VAIDYA. *Indian J Med Res* 1994;100:19.

Enzyme immunoassay and direct immunofluorescence for detection of *Chlamydia trachomatis* antigen in male first-void urine.

MA DOMEIKA, M BASSIRI, PA MARDH. Arch Dermato-Venereol 1994;74:323.

Rapid detection of *Chlamydia trachomatis* in conjunctival, pharyngeal and urethral specimens with a new polymerase chain reaction assay.

HH KESSLER, K PIERER, D STUENZNER, P AUER-GRUMBACH, EM HALLER, E MARTH. Sex Transm Dis 1994;21:191.

An evaluation of the polymerase chain reaction *Amplicor Chlamydia trachomatis* in male urine and female urogenital specimens.

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A 1-year evaluation of Syva Micro-Trak Chlamydia enzyme immunoassay with selective confirmation by direct fluorescent-antibody assay in high-volume laboratory.

EL CHAN, K BRANDT, GB HORSMAN. J Clin Microbiol 1994;32:2208.

Chlamydia trachomatis from individuals in a sexually transmitted disease core group exhibit frequent sequence variation in the major outer membrane protein (omp 1) gene.

R BRUNHAM, CL YANG, I MACLEAN, J KIMANI, G MAITHA, F PLUMMER J Clin Invest 1994;94:458.

Proliferative response to conserved epitopes of the *Chlamydia trachomatis* and human 60-kilodalton heat-shock proteins by lymphocytes from women with salpingitis.

SS WITKIN, J JEREMIAS, M TOTH, WJ LEDGER. Am J Obstet Gynecol 1994;171:455.

Protection against infertility in a BALB/c mouse salpingitis model by intranasal immunization with the mouse pneumonitis biovar of *Chlamydia trachomatis*.

S PAL, TJ FIELDER, EM PETERSON, LM DELAMAZA. Infect Immun 1994;62:3354.

Candidiasis

Frequency and significance of drug resistance in vulvovaginal candidiasis.

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J RUIZHERRERA, S MORMENEO, P VANACLOCHA, J FONTDEMORA, M IRANZO, I PUERENTES, R SENTANDREU. *Microbiology* 1994;140:1513.

Activity of fluconazole: post-antifungal effect, effects of low concentrations and of pretreatment on the susceptibility of *Candida albicans* to leucocytes.

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Bacterial vaginosis

Effect of metronidazole in patients with preterm birth in preceding pregnancy and bacterial vaginosis: a placebo-controlled, double-blind study.

WJ MORALES, S SCHORR, J ALBRITTON. Am J Obstet Gynecol 1994;171:345.

Syphilis and other treponematoses

Syphilis, contagion and the place of sexuality in the late 19th-century America. RL MARTENSEN. JAMA 1994;272:269.

Immunosuppression in patients with syphilis and problems of human immunodeficiency virus infection.

N TSERAIDI. Acta Dermato-Venereol 1994;74: 317.

Binding of host-associated treponeme proteins to collagens and laminin: a possible mechanism of spirochetal adherence to host tissues.

T UMEMOTO, I NAMIKAWA. Microbiol Immunol 1994;38:655.

Hepatitis

The hepatitis C virus and its infection. FEMS Microbiology Reviews 1994;14:(whole issue).

High rate of nonspecific anti-hepatitis C reactivity amongst homosexual men in comparison with that found in other sexually active groups and blood donors.

J ANDREU, MA ABAD, A SANCHEZQUIJANO, et al.

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Spread of hepatitis C virus among sexual partners of HCVAb positive intravenous drug users.

C GABRIELLI, A ZANNINI, R CORRADINI, S GAFA. J Infect 1994;29:17.

Hepatitis C, hepatitis B and human immunodeficiency virus infections among non-intravenous drug-using patients attending clinics for sexually transmitted diseases.

DL THOMAS, RO CANNON, CN SHAPIRO, EW HOOK, MJ ALTER, TC QUINN. J Infect Dis 1994;169:990.

Overcoming class II-linked non-responsiveness to hepatitis B vaccine.

S HERVASSTUBBS, C BERASAIN, JJ GOLVANO, et al. Vaccine 1994;12:867.

Herpes

Recurrence and resistance patterns of herpes simplex virus following cessation of) 6 years of chronic suppression with acyclovir.

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Isolation of herpes simplex virus from sexually transmitted disease patients in Ibadan, Nigeria.

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Neonatal herpes simplex virus infection: pathogenesis and treatment in the guinea pig.

FJ BRAVO, MG MYERS, LR STANBERRY. J Infect Dis 1994;169:947.

Necrotizing funisitis and herpes simplex infection of placental and decidual tissues: study of four cases.

SA HEIFETZ, M BAUMAN. Hum Pathol 1994;25:715.

Cervical antibodies in patients with oral herpes simplex virus type 1 infection: local anamnestic responses after genital HSV-2 infection.

R ASHLEY, A WALD, L COREY. *J Virol* 1994;**68**:5284.

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The herpes simplex virus regulatory protein ICP27 contributes to the decrease in cellular mRNA levels during infection.

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Identification of a target protein of US3 protein kinase of herpes simplex virus type 2.

T DAIKOKU, R KURACHI, T TSURUMI, Y NISHIYAMA. J Gen Virol 1994;75:2065.

Human papillomavirus infection

The aetiology of vulval neoplasia.
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Molecular biology of human papillomavirus infection and oncogenesis.

EJ ANDROPHY. J Invest Derm 1994;103:248.

Relation between human papillomavirus type 16 and potential for progression of minor-grade cervical disease.

GP DOWNEY, PJ BAVIN, ARS DEERY, et al. Lancet 1994;344:432.

Cellular control of human papillomavirus oncogene transcription.

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GG GARZETTI, A CIAVATTINI, G GOTERI, et al. Gynecol Obstet Invest 1994;38:134.

Treatment of anal intraepithelial neopla-

JH SCHOLEFIELD, OA OGUNBIYI, JHF SMITH, K ROGERS, F SHARP. Br J Surg 1994;81:1238.

Cervical-vaginal and intraanal human papillomavirus infection of young girls with external genital warts.

LT GUTMAN, KK STCLAIRE, VD EVERETT, et al. J Infect Dis 1994;170:339.

A longitudinal study of human papillomavirus DNA detection in human immunodeficiency virus type 1 seropositive and seronegative women.

SD VERNON, WC REEVES, KA CLANCY, et al. J Infect Dis 1994;169:1108.

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Effects of human papillomavirus typespecific antisense oligonucleotides on cervical cancer cells containing papillomavirus type 16.

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Cervical cytology and colposcopy

Characteristics of cervical intraepithelial neoplasia in women infected with the human immunodeficiency virus.

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The Papanicolaou smear as a sentinel screening test for health screening in women.

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A comparison of the three most common Papanicolaou smear collection techniques.

M GERMAIN, R HEATON, D ERICKSON, M HENRY, J NASH, D OCONNOR. Obstet Gynecol 1994;84:168.

Management of suboptimal cytologic smears—persistent inflammatory smears.

N MCLACHLAN, JR PATWARDHAN, B AYER, NF PACEY. Acta Cytol 1994;38:531.

Toward objective quality assurance in cervical cytopathology—correlation of cytopathologic diagnoses with detection of high-risk human papillomavirus types.

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Other sexually transmitted diseases

Experimental human infection with Haemophilus ducreyi.

SM SPINOLA, LM WILD, MA APICELLA, AA GASPARI, AA CAMPAGNARI. *J Infect Dis* 1994;169:1146.

Single dose azithromycin for the treatment of chancroid: a randomized comparison with erythromycin.

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PA TOTTEN, WR MORTON, GH KNITTERM, AM CLARK, NB KIVIAT, WE STAMM. J Infect Dis 1994;169:1284.

Clear broth and plate media for culture of *Haemophilus ducreyi*.

PA TOTTEN, WE STAMM. J Clin Microbiol 1994;32:2019.

Public health and social aspects

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MW TYNDALL, E AGOKI, FA PLUMMER, W MALISA, JO NDINYAACHOLA, AR RONALD. Sex Transm Dis 1994;21:226.

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Condom promotion, sexually transmitted disease treatment and declining incidence of HIV-1 infection in female Zairian sex workers.

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Condom use by Norplant users at risk for sexually transmitted diseases.

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Microbiology and Immunology

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